

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000122958

**FILED**  
**Jan 12, 2012**  
**Secretary of State**

**Entity Name:** CHESTER LABS, LLC

**Current Principal Place of Business:**

770 E. ATLANTIC AVENUE  
SUITE 201  
DELRAY BEACH, FL 33483 US

**New Principal Place of Business:**

115 SE 4TH AVENUE  
DELRAY BEACH, FL 33483 US

**Current Mailing Address:**

770 E. ATLANTIC AVENUE  
SUITE 201  
DELRAY BEACH, FL 33483 US

**New Mailing Address:**

455 NE FIFTH AVENUE, STE D-373  
C/O CHESTER PARTNERS  
DELRAY BEACH, FL 33483 US

**FEI Number:** 27-4076896

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

THOMAS O. WELLS, P.A.  
540 BILTMORE WAY  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: SNYDER, STEPHEN F  
Address: 455 NE FIFTH AVENUE, SUITE D - 373  
City-St-Zip: DELRAY BEACH, FL 33483 US

Title: MGR  
Name: SNYDER, JAMIE S  
Address: 455 NE FIFTH AVENUE, SUITE D - 373  
City-St-Zip: DELRAY BEACH, FL 33483 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: STEPHEN F. SNYDER

MGR

01/12/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date